

# Gift Acceptance Report

UCDF 100-4



1. <b>DONOR NAME</b> (Last, First, Middle Initial)		3. <b>SOFT CREDIT NAME</b> (Last, First, Middle Initial)	
2. <b>ADDRESS OF DONOR</b> (Street, City, State, Zip)		4. <b>ADDRESS</b> (Street, City, State, Zip)	
5. Credit Card Attached Yes <input type="checkbox"/> No <input type="checkbox"/>		6. Benefiting School/College/Other	
7. New Pledge <input type="checkbox"/> Pledge Pmt. <input type="checkbox"/>		8. Department Name	
9. <b>DONOR INSTRUCTIONS/WISHES</b> (As stated by the Donor)		10. Anonymous <input type="checkbox"/> Yes <input type="checkbox"/> No	11. Acknowledgement Attached <input type="checkbox"/> Yes <input type="checkbox"/> Send Later

Sample

12. <b>TYPE OF USE</b> <input type="checkbox"/> Endowment <input type="checkbox"/> Current Use	13. <b>SOURCE OF GIFT FEE</b> <input type="checkbox"/> Gift- Deduct fee from the gift. <input type="checkbox"/> Donor- The donor contributed an additional 6% to cover the fee. <input type="checkbox"/> Discretionary- The dean/vice chancellor has elected to pay the fee from the following discretionary account. DaFIS Account # _____ Dean/Vice Chancellor signature _____ <input type="checkbox"/> Earnings- for gifts of \$100,000 or more. An approval letter signed by vice chancellor, University Relations is attached. <input type="checkbox"/> No Fee- Chancellor's approved exception - An exemption letter signed by the Chancellor attached.	
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14. <b>DATE RECEIVED</b>	15. <b>GIFT PLEDGED</b>	16. <b>GIFT RECEIVED</b>
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## TRANSFER FUNDS

17. <b>Fund Name</b>		18. <b>DaFIS Acct #</b> <b>Foundation Fund #</b>		19. <b>Suspense Restricted</b> 901002- <input type="checkbox"/> Yes <input type="checkbox"/> No	
20. <b>Form Prepared By / Contact Person (Type Name)</b>		<b>Department &amp; Phone No.</b>		<b>Date</b>	
21. <b>Submitted for Acceptance By (Type Name/Signature)</b>		<b>Title &amp; Phone No.</b>		<b>Date</b>	
<b>Acceptance By (Type Name / Signature)</b> Melissa Ivanusich		<b>Title</b> Gift Administration Manager		<b>Date</b>	
<b>UCD Foundation Authorized Signature</b>		<b>Title</b>		<b>Date</b>	
<b>Date sent to Department</b>	<b>Date rec'd by UCDF</b>	<b>Date sent to Accounting</b>		<b>Date Returned</b>	
<b>Funds originally deposited to:</b>		<b>TA. No.</b>		<b>Gift No.</b>	
		<b>AIS#</b>			